

MEMBERS PRESENT

Springfield Location:

Michele Carmichael	Alan Dietrich	David Elder	Seth Harkins
Merlin Lehman	Andrea Medley	Dee Ann Ryan	Julie Stremlau
Brooke Whitted			

Chicago Location: (attending by Video conference)

Bob Bloom	Kathy Briseno	Jason Johnson
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MEMBERS ABSENT

Arthur Bishop	Linda Chapa La Via	Edgar Hernandez	Debra Kinsey
James T. Meeks	Gary Seelbach	Randy Staton	

STAFF PRESENT

Springfield Location:

Mindy Miller	John Schornagel	Linda Prewitt
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Chicago Location: (attending by Video conference)

Robert Watts

LIAISONS PRESENT

None

GUESTS

None

I. CALL TO ORDER

Chairperson Harkins called the meeting to order at 9:33 a.m. Members and staff in attendance introduced themselves.

II. APPROVAL OF THE OCTOBER 13, 2012 MINUTES

The Authority reviewed the minutes of the October 13, 2012 meeting. Several members offered amendments.

MOTION: Kathy Briseno moved and David Elder seconded that the minutes of the October 13, 2012 Authority meeting be approved with amendments. The motion carried unanimously.

III. STAFF REPORT

Director Schornagel referenced the following informational handouts:

- Staff Activity Reports for October and November 2012. He noted that there are currently no children pending Dispute Resolution activity.
- Director Schornagel referenced several documents from ACMHIA that were adopted earlier in the week to “seize the opportunity for improving children’s behavioral health services in the community”. CRSA member Dee Ann Ryan wanted to make sure that we had these documents for review and discussion. Director Schornagel stated that he only got them a few days ago and as such, is offering them as informational items for discussion later in the agenda. He added that the recommendations closely resemble recommendations made recently to the Illinois Human Services Commission, by the Children’s Behavioral Health Sub-Workgroup.

Chairperson Harkins commented that the ACMHAI recommendations and the recommendations of the Children’s Behavioral Workgroup of the Governor’s Human Service Commission are both consistent with CRSA’s mission and service principles and that CRSA should be supportive of these combined recommendations. Dee Ann Ryan commented that the recommendations made to the Governor’s office by the Children’s Behavioral Health Workgroup of the Governor’s Human Service Commission were unanimously adopted by the Commission in recent weeks and passed along to the Governor’s office. The documents also contain references to expanded access to Medicaid services under EPSDT, reduced reliance on increasingly expensive psychiatric hospitalizations and expanded services hopefully to be made available under the Affordable Care Act (ACA). She also referenced that there was some palpable resistance to the recommendation that the Illinois Children’s Mental Health Partnership (ICMHP) being named as the lead agency to implement overall children’s mental health systems change. Chairperson Harkins commented that the logical agency which has authority to spearhead systems change under the ACA would be the Illinois Department of Healthcare and Family Services (HFS).

IV. AGENCY REPORTS

Michele Carmichael, speaking on behalf of the ISBE Assistant Director of Special Education, Elizabeth Hanselman, expressed concerns about recent complaints received from school districts pertaining to the work that CRSA staff do at IEP staffings in the field. She recommended that CRSA staff announce their participation in an IEP in advance of and IEP staffing and sign in on the IEP sheet. She cautioned CRSA staff in the field to be sure to represent themselves as CRSA staff and not staff of the ISBE, so that there is clear separation between the two agencies. She also reminded the Board that LEAs only residentially place students for educational purposes and not because other federally and state funded programs cannot serve them for other than educational purposes. She added that a follow-up letter will be forthcoming from ISBE administration.

Director Schornagel commented that CRSA staff in the field do inform LEAs of their participation in IEP meetings in advance, when practicable, do sign off on IEP sheets as non-voting IEP members and do not represent themselves as ISBE staff. He commented that as traditional state supported services (community-based and residential) shrink that parents often turn to LEAs to pay for services for kids with special education eligibility based upon existing federal legislation. He added that CRSA staff have been noticing the funding/service shift to LEAs for some time and were wondering where, when and how the ISBE would take steps to partition their resources for educational purposes only. He ended his remarks by saying that CRSA Field staff do not do educational advocacy, rather they do parent education and parent empowerment most often using ISBE documents posted on the ISBE website.

Discussion among member ensued. Dee Ann Ryan commented that from her perspective psychiatric hospitalizations are the most restrictive and the most expensive placements for kids that have emotional/behavioral disabilities. Bob Bloom commented that the coming DSM-V Diagnostic Manual may eliminate or significantly change the criteria for pediatric bi-polar disorder, Asperger's syndrome, autism and Retts syndrome, and he fears will weaken the multi-access system currently in place. He also opined that that the Illinois Autism Technical Assistance Project is "a diamond in the rough" for that population.

V. OLD BUSINESS

A. Proposed FY 14 CRSA Spending Plan Update

Director Schornagel updated the Authority that the FY 14 expenditure request of \$592,300 is being reviewed within the ISBE and he anticipates that it is likely to approved and passed on to the Governor's Office of Management and Budget (OMB). Director Schornagel will bring a final FY 14 spending plan back to the Board for final approval after OMB responds to the appropriation request.

B. Other

Bob Bloom commented that he has not received comment from the ISBE yet relating to a formal CRSA request, now over a year ago, related to testing accommodations for kids that are designated as RtI kids. Director Schornagel agreed to make enquiries and report back.

VI. NEW BUSINESS

None

VII EXECUTIVE COMMITTEE REPORT

Chairperson Harkins informed the Authority that most of the items discussed in Executive Committee have been covered in earlier agenda items. He reiterated that the role of CRSA in the service system may change in a fluid and dynamic service environment.

VIII. OPEN DIALOGUE

Dee Ann Ryan updated the Authority on the status of the current EPSDT lawsuits pending in Illinois, commenting that even through there have been a variety of lawsuits surrounding lack of access to EPSDT and PRTFs for Medicaid eligible children with mental illness, that these combined suits have not led to a class action status in the courts. She added that some of the children represented in these lawsuits have been directed to out-of-state PRTF placements by court orders. Members expressed related concerns about the adequacy of the Illinois community-based service system to meet the needs of emotionally disturbed and mentally ill children, which tend to shift resources away from the community to more restrictive hospitals, residential placements and institutional placements. There was also expressed concern that kids are being stepped down from residential and hospital placements with full knowledge that the services they need at the community level are simply not available. Brooke Whitted suggested that something be put in writing to ACADIA Healthcare regarding these concerns as they are expanding and could be a viable resource for Illinois if and when Illinois develops PRTFs and a fuller continuum of residential placement options.

IX. COMMENTS AND ANNOUNCEMENTS

David Elder thanked Brooke Whitteds wife, Linda, for the wonderful snacks she sends to CRSA in Springfield and urged the Authority to keep the Seelbach family in their thoughts and prayers as they pass through medical travails.

X. PUBLIC PARTICIPATION

None

XI. ADJOURNMENT

MOTION: *David Elder moved and Kathy Briseno seconded that the meeting be adjourned at 10:38 a.m. The motion carried unanimously.*